

Practitioner's Docket No. 40016420-0001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Benson, Donald B.	)	<b><u>PATENT</u></b>
		)	
Application No.:	Unknown	)	
		)	
Filed:	Unknown	)	
		)	
Title:	SYSTEM AND METHOD	)	
	FOR COMBINED MAILING	)	
	OF A PLURALITY OF	)	
	DIVERSE PUBLICATIONS	)	
	IN A UNIQUE ORDER	)	
		)	

**DECLARATION**

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM AND METHOD FOR COMBINED MAILING OF A PLURALITY OF DIVERSE PUBLICATIONS IN A UNIQUE ORDER**

the specification of which

  X   is attached hereto;

Or


       Was filed on            as United States Application Number           .

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.



As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: →

Name Michael A. Molano, Esq.	Registration Number 39,777	Name	Registration Number
Direct all correspondence to:  Michael A. Molano, Esq., Sonnenschein Nath & Rosenthal, 685 Market Street, 6 <sup>th</sup> Floor, San Francisco, CA 94105, 415-882-0342(tel.), 415-543- 5472 (fax)		Customer Number or Bar Code Label	OR <input type="checkbox"/> Correspondence address below
Inventor Name, Signature and Date	Donald B. Benson   8/7/00		
Address	6451 Melville Drive		
City	Oakland		
County	Alameda	State	CA ZIP 94611-1730
Citizenship	USA	Telephone	Fax
Inventor Name and Signature			
Address			
City			
County		State	ZIP
Citizenship		Telephone	Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.			